UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
*Date of Request: 10/19/01 2 Serial/Patent # 09/349/5/5			
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment	9	9/17/01	\$ 80.00
Extension of Time		, ,	\$
Notice of Appeal/Appeal			\$
Petition			\$ _.
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance		·	\$
Assignment			\$
Other			\$
	7 TOTAL AMOUNT S SO. 00 8 TO BE REFUNDED BY:		
10 REASON:	Treasury Check		
Overpayment	Credit Deposit A/C #:		
Duplicate Payment	9 /	9 1	35/
No Fee Due (Explanation):			
Claim fee was already pd. by check-			
	- 		
11 REFUND REQUESTED BY: TYPED/PRINTED NAME: ANGRE (WYCh— TITLE: 1613, EXOV.			
702/2/2/			
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OFFICE: <u>PCHTTOLD</u> [] (' ************************************			
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: Clica Kelle DATE: 10-22-70			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B